# N19000008124

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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#### **COVER LETTER**

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

SUBJECT: Moving 50103 from S.C. to FL.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

#### FEES:

Certificate of Domestication \$50.00
Articles of Incorporation and Certified Copy \$78.75
Total to domesticate and file \$128.75

**OPTIONAL:** 

\$137.50

**Certificate of Status** 

\$8.75

Senior Life Journeys

Name (printed or typed)

19990 Barletta Lane # 813

Address

Estero, FL 33928

City, State & Zip

803-984-9875

Daytime Telephone Number

Carol @ Senior life journeys. Lom

E-mail address: (to be used for future annual report notification)

## NOT FOR PROFIT CERTIFICATE OF DOMESTICATION

The	undersigned. LARDL L. HUWELL . President
of .	Senior Life Jowneys (Title)  a foreign Corporation
in a	(Corporation Name) accordance with section 617.1803, Florida Statutes, does hereby certify:
1.	The date on which corporation was first formed was OCTOBET 1, 2014. 2014
2.	The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was
3.	The name of the corporation immediately prior to the filing of this Certificate of Domestication was Sprior Life Journey 5.
4.	The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 617.01201 and 617.0202 with this certificate is Senior Life Source 5 For
5.	The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was
6.	Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 617.1803.
I ai	"Corol Howell or Senior Life Joxineys
	this the 15th day of 5th b
	(Authorized Signature)
	Filing Fee:  Certificate of Domestication \$50.00 FEST AFTO TOTAL to domesticate and file \$128.75

### ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S. (Not for Profit)

ARTICLE I NAME	
The name of the corporation shall be:	
Senior Life Jour	neys Inc
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address shall be: Principal Address	
	Mailing Address
1999D Borletta Lane #813	19990 Borletta Lane #81
ESKOU, FL 33928	Esto0, FL 33928
A DAVAL D LIL DUDDAAD	
ARTICLE III PURPOSE  The purpose for which the corporation is organized:	
Senior Life Jarneys is de	adirated to the
<b>O</b>	
Education of dementia for	L WA-MOLKET
and under-appreciated	coregivers.
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ARTICLE IV WANNER OF ELECTION			
The manner in which the directors are elected or appointed:			
Directors are elected by	the board via The		
majority vote			
3 1			
<del></del>			
ARTICLE V INITIAL DIRECTORS AND/ The name(s) and address(es) and specific title(s):	OR OFFICERS		
•			
Title/Name	Title/Name		
Carol Howell, President			
19990 Barletta Lone # 813	1080 Pinecrest		
Estoo, FL 33928	ROCK HILL SC 29732		
Title/Name	Title/Name		
Charlotte Kilpatrick, Vice Ars.	Dovid Lyon, Member		
BI Sherwood Circle	1674 Huntmoor Drive		
ROCK MIII, &C 29730	ROCK Hill, SC 29732		
	1,000		
Title/Name	Title/Name		
Suzanne Wright, Treasurer	Dr. Steve Dehme, Member		
339 College Avenue	1435 Ebenezer Road		
ROCK HILL, SC 29730	ROCK HILL, SC29732		

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS			
The name and Florida street address (P.O. Box NOT acceptable) of	the registered agent is:		
CAROL L. HOWELL			
19990 Borletta Lane #813			
Estero, FL 33928			
ARTICLE VII INCORPORATOR			
The <u>name and address</u> of the incorporator is:			
CARDL L. HOWELL			
19990 Borietta Lone #813			
Estro, FL 33928			
**************	*********		
Having been named as registered agent and to accept service of process for the abo			
in this certificate, I am familiar with and accept the appointment as registered agen	t and agree to act in this capacity.		
Swil Labourell	7/15/19		
Signature/Registered Agent	Date		
Grol L. Howell	7/15/19		
Signature/Incorporator	Date		